

File Original and First Copy with
Department of Ecology
Second Copy—Owner's Copy
Third Copy—Driller's Copy

WATER WELL REPORT

STATE OF WASHINGTON

Start Card No

29/SE/23 K
075609

Water Right Permit No

(1) OWNER Name BAYVIEW WATER DIST 1 Address 1916 E SHORE AVE, FREELAND WA

(2) LOCATION OF WELL County ISLAND NW 1/4 SE 1/4 Sec 23 T29 N R2E WM

(2a) STREET ADDRESS OF WELL (or nearest address) 1916 E SHORE AVE FREELAND WA

(3) PROPOSED USE ☐ Domestic ☐ Industrial ☐ Municipal ☐
☐ Irrigation ☐ Test Well ☒ Other ☐
☐ DeWater

(10) WELL LOG or ABANDONMENT PROCEDURE DESCRIPTION

Formation Describe by color character size of material and structure and show thickness of aquifers and the kind and nature of the material in each stratum penetrated with at least one entry for each change of information

(4) TYPE OF WORK Owner a number of well (if more than one) 2

Abandoned ☐ New well ☒ Method Dug ☐ Bored ☐
Deepened ☐ Cable ☒ Driven ☐
Reconditioned ☐ Rotary ☐ Jetted ☐

MATERIAL	FROM	TO
SAND	0	14
DIRTY COMPACT SAND	14	76
SAND - DIRTY	76	108
WATER IN SAND	108	166
WATER SAND - FINER	166	

(5) DIMENSIONS Diameter of well 6 inches
Drilled 166 feet Depth of completed well 166 ft

(6) CONSTRUCTION DETAILS

Casing installed 6 Diam from 0 ft to 156 ft
Welded ☒ Diam from ft to ft
Liner installed ☐ Diam from ft to ft
Threaded ☐

Perforations Yes ☐ No ☒
Type of perforator used
SIZE of perforations in by in
perforations from ft to ft
perforations from ft to ft
perforations from ft to ft

Screens Yes ☒ No ☐
Manufacturer's Name Johnson
Type STAINLESS Model No
Diam 6 Slot size 12 from 156 ft to 166 ft
Diam Slot size from ft to ft

Gravel packed Yes ☐ No ☒ Size of gravel
Gravel placed from ft to ft

Surface seal Yes ☒ No ☐ To what depth? 18 + ft
Material used in seal CEMENT

Did any strata contain unusable water? Yes ☐ No ☒
Type of water? Depth of strata
Method of sealing strata off

(7) PUMP Manufacturer's Name H.P.
Type Sub

(8) WATER LEVELS Land surface elevation above mean sea level 125 ft
Static level 108 ft below top of well Date MAR 91
Artesian pressure lbs per square inch Date
Artesian water is controlled by (Cap valve etc.)

(9) WELL TESTS Drawdown is amount water level is lowered below static level
Was a pump test made? Yes ☐ No ☒ If yes by whom?
Yield gal / min with ft drawdown after hrs

Recovery data (time taken as zero when pump turned off) (water level measured from well top to water level)

Time Water Level Time Water Level Time Water Level

Date of test

Bailer test 20 gal / min with 10 - ft drawdown after 2 hrs

Artest gal / min with stem set at ft for hrs

Artesian flow g p m Date

Temperature of water Was a chemical analysis made? Yes ☐ No ☒

ISLAND County Well Site
APPROVED
RECEIVED
MAR 20 1991
DEPT OF ECOLOGY

Work started MAR 19 91 Completed MAR 19 91

WELL CONSTRUCTOR CERTIFICATION

I constructed and/or accept responsibility for construction of this well and its compliance with all Washington well construction standards. Materials used and the information reported above are true to my best knowledge and belief.

NAME WHIDBEY DRILLERS
(PERSON FIRM OR CORPORATION) (TYPE OR PRINT)

Address OAK HARBOR WA 98277

(Signed) [Signature] License No 129
(WELL DRILLER)

Contractor's Registration No WHIDBEY 259 Date MAR 19 91
MAR

(USE ADDITIONAL SHEETS IF NECESSARY)



Well Tagging Form

#2

Unique Well Tag No: A6A596

RECORD VERIFICATION (check one)

- ☐ Well Report available (please attach this form to the well report and submit it to the Ecology Regional Office near you)
- ☐ Verification inconclusive
- ☐ Well Report not available
- See #2*

WELL OWNERSHIP, IF DIFFERENT FROM WELL REPORT

First Name BAYVIEW ESTATES WATER CO Last Name _____

Street Address 04956 T

City _____ State _____

LOCATION OF WELL, IF DIFFERENT FROM WELL REPORT

Well Address BETWEEN 631 & 645 JEFFRIES

City _____ County _____

T _____ N R _____ WM Sec _____ 1/4 of the _____

FOR AGENCY USE ONLY

Latitude _____

Longitude _____

Elevation at land surface _____ feet/meters (circle one)

Additional information, if available

- ☐ GPS
- ☐ Topographic Map
- ☐ Survey
- ☐ Computer generated
- ☐ Digital Altimeter
- ☐ Topographic Map
- ☐ Other _____

- ☐ Location marked on topographic map (please attach)
- ☐ Location marked on air photo (please attach)

FOR AGENCY USE ONLY

WELL CHARACTERISTICS

Physical Description of well (size of casing, type of well, housing, etc.)

"CASING; CEMENT HOUSING WITH WOOD/TIN ROOF (~4' HIGH)

PUMP HOUSE, HOLDING TANK ADJACENT

Location of Well Identification Tag

CASING

Is supplemental tag needed for ease of identifying well?

☐

Yes

☒

No

Where was tag placed?

Scale 1 24,000 (1"=2,000')

Indicate the location of the well within the Section by drawing a dot at that point.

SECTION

C	B	A
F	G	H
L	K	J
P	Q	R

REMARKS

FOR ECOLOGY WATER RESOURCES PROGRAM ONLY

Right #

Date Issued

One

Application

Permit

Certificate

Claim

Exempt

File Original and First Copy with
Department of Ecology
Second Copy—Owner's Copy
Third Copy—Driller's Copy

WATER WELL REPORT

STATE OF WASHINGTON

Well tag id: AGAB25 29/SE/23 K
Start Card No. 075609

Water Right Permit No. _____

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(2) LOCATION OF WELL: County ISLAND NW 1/4 SE 23 N. 2E W.M.

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(3) PROPOSED USE: ☐ Domestic ☐ Industrial ☐ Municipal ☐
☐ Irrigation ☐ Test Well ☒ Other ☐
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(4) TYPE OF WORK: Owner's number of well (if more than one) 2
Abandoned ☐ New well ☒ Method: Dug ☐ Bored ☐
Deepened ☐ Cable ☒ Driven ☐
Reconditioned ☐ Rotary ☒ Jetted ☐

(5) DIMENSIONS: Diameter of well 6 inches.
Drilled 166 feet. Depth of completed well 166 ft.

(6) CONSTRUCTION DETAILS:

Casing installed: 6 ft. Diam. from 0 ft. to 156 ft.
Welded ☒ ft. Diam. from _____ ft. to _____ ft.
Liner installed ☐ ft. Diam. from _____ ft. to _____ ft.
Threaded ☐ ft. Diam. from _____ ft. to _____ ft.

Perforations: Yes ☐ No ☒

Type of perforator used _____

Size of perforations _____ in. by _____ in.
_____ perforations from _____ ft. to _____ ft.
_____ perforations from _____ ft. to _____ ft.
_____ perforations from _____ ft. to _____ ft.

Screens: Yes ☒ No ☐

Manufacturer's Name JOHNSON

Type STAINLESS Model No. _____
Diam. 6 Slot size 12 from 156 ft. to 166 ft.
Diam. _____ Slot size _____ from _____ ft. to _____ ft.

Gravel packed: Yes ☐ No ☒ Size of gravel _____
Gravel placed from _____ ft. to _____ ft.

Surface seal: Yes ☒ No ☐ To what depth? 18 ft.
Material used in seal CEMENT

Did any strata contain unusable water? Yes ☐ No ☒
Type of water? _____ Depth of strata _____
Method of sealing strata off _____

(7) PUMP: Manufacturer's Name _____
Type: Sub H.P. _____

(8) WATER LEVELS: Land-surface elevation 125 ft.
Static level 108 ft. below top of well Date MAR 91
Artesian pressure _____ lbs. per square inch Date _____
Artesian water is controlled by _____ (Cap, valve, etc.)

(9) WELL TESTS: Drawdown is amount water level is lowered below static level
Was a pump test made? Yes ☐ No ☒ If yes, by whom? _____
Yield: _____ gal./min. with _____ ft. drawdown after _____ hrs.

Recovery data (time taken as zero when pump turned off) (water level measured from well top to water level)
Time Water Level Time Water Level

Date of test _____

Bailer test 20 gal./min. with 10 ft. drawdown after 2 hrs.

Airtest _____ gal./min. with stem set at _____ ft. for _____ hrs.

Artesian flow _____ g.p.m. Date _____

Temperature of water _____ Was a chemical analysis made? Yes ☐ No ☒

(10) WELL LOG or ABANDONMENT PROCEDURE DESCRIPTION

Formation: Describe by color, character, size of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of information.

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SAND - DIRTY	76	108
WATER IN SAND	108	166
WATER SAND - FINE	166	

ISLAND COUNTY Well Site
Approved

RECEIVED

MAR 20 1991

DEPT. OF ECOLOGY

Work started MAR 19/ Completed MAR 19/91

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(PERSON, FIRM, OR CORPORATION) (TYPE OR PRINT)

Address OAK HARBOR WA 98277

(Signed) [Signature] License No. 129
(WELL DRILLER)

Contractor's Registration No. NOVARD 209 Date MAR 19/91

(USE ADDITIONAL SHEETS IF NECESSARY)